



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sharma et al.

Serial No. 10/049,718

Filed: February 13, 2002

For: Melanocortin Metallopeptide Constructs,
Combinatorial Libraries and Applications

Examiner: J. E. Russel

Group Art Unit: 1654

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment for the above application.

X Applicant is a small entity (claimed under 37 CFR 1.27)

CALCULATION OF ADDITIONAL CLAIMS

	Remaining CLAIMS: after Amendment	Highest No. Previously Paid For	Present Extra	ENTITY RATE Small OR Large	FEE RATE
TOTAL	54	MINUS MINUS	49	5 x \$25 x \$50	= \$125.00 = \$0
IDEP.	3	MINUS MINUS	5	x \$100 x \$200	= \$0 = \$0
		First Presentation of Multiple Dep. Claim		+ \$180 + \$360	= \$0 = \$0
					TOTAL \$125.00

Please charge Deposit Account No. 50-3582 in the amount of \$125.00 to cover the required additional claims fee. Please charge any additional fees or credit overpayment to deposit Account No. 50-3582.

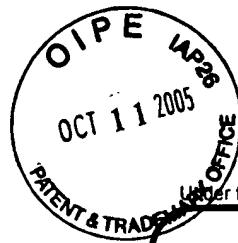
Respectfully submitted,

By: 
Stephen A. Slusher
Reg. No. 43,924
Direct Dial: 609-495-9197

Attorney for Applicant
Palatin Technologies, Inc.
4-C Cedar Brook Drive
Cranbury, NJ 08512

Customer No. 55506

L:\Patent Applications\Amendments and Responses\Metallopeptides\'718 OA Response.doc



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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/049,718
		Filing Date	February 13, 2002
		First Named Inventor	Shubh D. SHARMA et al.
		Group Art Unit	1654
		Examiner Name	J. E. Russel
Total Number of Pages in This Submission	18	Attorney Docket Number	70025-02-US02

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Amendment Transmittal
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

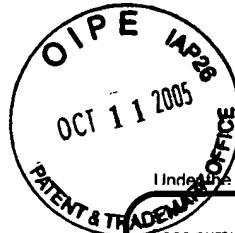
Firm or Individual name	Stephen A. Slusher
Signature	
Date	7 October 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 10/7/2005

Typed or printed name	Brenda L. Guadagno		
Signature		Date	10/7/2005

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 125.00)

Complete if Known	
Application Number	10/049,718
Filing Date	February 13, 2002
First Named Inventor	Shubh D. SHARMA et.al
Examiner Name	J. E. Russel
Art Unit	1654
Attorney Docket No.	70025-02-US02

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: 50-3582 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)	<input type="checkbox"/> Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
0 - 20 or HP =	0 x	25.00	= 0.00	0.00	0.00

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
0 - 3 or HP =	0 x	100.00	= 0.00	0.00	0.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Additional Claims Fee

125.00

SUBMITTED BY

Signature		Registration No. 43,924 (Attorney/Agent)	Telephone 609 495 9197
Name (Print/Type)	Stephen A. Slusher		Date 70025-02-US02

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION

hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on October 7, 2005.


Brenda L. Guadagno

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Group Art Unit: 1654

AMENDMENT AND RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action dated July 7, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 13 of this paper.

10/12/2005 FMETEK1 00000024 503582 10049718

01 FC:2202 125.00 DA